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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/674,363	
		Filing Date	September 29, 2003	
		First Named Inventor	Paul S. Diefenbaugh	
		Art Unit	2676	
		Examiner Name	Brautigam, Alysa	
Total Number of Pages in This Submission		17	Attorney Docket Number	42P17696

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscapes Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Facsimile Transmittal Sheet </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Brent E. Vecchia, Reg. No. 48,011 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>Brent E. Vecchia</i>
Date	September 22, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Brent E. Vecchia		
Signature	<i>Brent E. Vecchia</i>	Date	September 22, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 11/30/2005.
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**FEE TRANSMITTAL
for FY 2005***Patent fees are subject to annual revision.*☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete if Known

Application Number	10/674,363
Filing Date	September 29, 2003
First Named Inventor	Paul S. Diefenbaugh
Examiner Name	Brautigam, Alysa
Art Unit	2676
Attorney Docket No.	42P17696

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):

☐ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakey, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayment of fee(s)☒ Credit any overpayments

under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
55	72	0	\$0.00
5	8	0	\$0.00
Multiple Dependent			
Large Entity	Small Entity		
Fee Code	Fee Code	Fee Description	
1202 50	2202 25	Claims in excess of 20	
1201 200	2201 100	Independent claims in excess of 3	
1203 380	2203 180	Multiple Dependent claim, if not paid	
1204 790	2204 395	Rescued independent claims over original patent	
1205 300	2205 150	Rescued claims in excess of 20 and over original patent	
SUBTOTAL (1)			(\$)

*For number previously paid, if greater. For Rescues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 60	2052 25	Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 130	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,690	2254 795	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
1401 500	2401 250	Notice of Appeal	
1402 500	2402 250	Filing a brief in support of an appeal	
1403 1,000	2403 500	Request for oral hearing	
1451	2451	Petition to institute a public use proceeding	
1460 130	2460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)	
1808 180	1808 180	Submission of Information Disclosure Stmt	
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)			
SUBTOTAL (2)			(\$)

SUBMITTED BY

Name (Print/Type)

Brent E. Vecchia

Registration No.
(Attorney/Agent)

48,011

Complete (if applicable)

Telephone

(303) 740-1980

Signature

Brent E. Vecchia

Date

09/22/06

Based on PTO/5B/17 (12-05) as modified by Blakey, Sokoloff, Taylor & Zafman (4/4) 12/16/2004.
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**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

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Complete if Known

Application Number	10/674,363
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First Named Inventor	Paul S. Diefenbaugh
Examiner Name	Brautigam, Alysa
Art Unit	2676
Attorney Docket No.	42P17696

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☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):

☐ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

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☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
☒ Credit any overpayments**FEE CALCULATION****1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
55	72	0	\$0.00
Independent Claims	5	0	\$0.00
Multiple Dependent			

Large Entity	Small Entity
Fee Code	Fee Code
1202 50	2202 25
1201 200	2201 100
1203 360	2203 180
1204 790	2204 365
1205 900	2205 150

SUBTOTAL (1)

(\$)

0.00

*or number previously paid, if greater. For Refunds, see below

2. ADDITIONAL FEES

Large Entity	Small Entity
Fee Code	Fee Code
1051 130	2051 65
1052 50	2052 25
2053 130	2053 130
1251 120	2251 60
1252 450	2252 225
1253 1,020	2253 510
1254 1,580	2254 765
1255 2,160	2255 1,080
1401 500	2401 250
1402 900	2402 250
1403 1,000	2403 500
1451	2451
1450 130	2450 130
1807 90	1807 50
1808 160	1808 160
1809 790	1809 365
1810 790	2810 365

Fee Description

Fee Paid

Other fee (specify)

SUBTOTAL (2)

(\$)

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(Attorney/Agent)

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Date

09/22/06

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Our Docket No: 42P17696

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Diefenbaugh et al.

Examiner: Antonio A. Caschera

Application No.: 10/674,363

Art Group: 2628

Filed: 09/29/2003

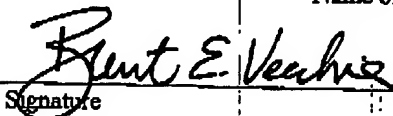
For: **DYNAMIC BACKLIGHT AND
IMAGE ADJUSTMENT USING
GAMMA CORRECTION**AMENDMENT AND RESPONSE TO THE OFFICE ACTIONCommissioner for Patents
Washington, DC 20231-9999

Sir:

In response to the Office Action mailed 06/22/2006, the Applicants respectfully request that the Examiner enter the following amendments and consider the following remarks.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that I am causing the above-referenced correspondence to be transmitted via facsimile to the United States Patent and Trademark Office at (571) 273-8300 on the date indicated below:

September 22, 2006
Date of Transmission~~Pat Sullivan~~ **BRENT. E. VECCHIA**
Name of Person Transmitting Correspondence
Signature09/22/2006
DateAtty Docket No. 42P17696
Application No. 10/674,363

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